Individual Agreement Form

WSDM 2019 Task Intelligence Workshop October 2018

I am	, an individual associated with the
organisation	
I intend to receive/use the information designated terms and conditions agreed to by my organisation agree to the understandings, terms and condition confirm that I will take care with the data so as to WSDM2019-TI collection.	n. I confirm that I have read, understood and ns of using the WSDM2019-TI collection. I
By the Individual:	
Signature:	
Date:	
Name (Printed):	
Email Address:	
Organisation Contact (Printed):	
Organisation Contact (Signature):	

Please print, complete the above, and give it to your organisation contact who will maintain these individual agreement forms, should they be requested at a later date.